

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail**

**Mail Stop ISSUE FEE**  
**Commissioner for Patents**  
**P.O. Box 1450**  
**Alexandria, Virginia 22313-1450**  
**or Fax (571) 273-2885**

OCT 5 2005  
 10:45A  
**RECEIVED**

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

20736 7590 10/04/2005

**MANELLI DENISON & SELTER**  
**2000 M STREET NW SUITE 700**  
**WASHINGTON, DC 20036-3307**

12/08/2005 MBEYENE2 00000198 010365 09519848

01 FC:1501 1400.00 DA

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

**Certificate of Mailing or Transmission**

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/519,848	03/06/2000	Mrudula Kanuri	95-307	8165

TITLE OF INVENTION: SELECTIVE ADDRESS TABLE AGING IN A NETWORK SWITCH BASED ON APPLICATION STATE DETERMINED FROM A RECEIVED DATA PACKET

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$1400	01/04/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
FERRIS, DERRICK W	2663	370-389000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☒ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Manelli Denison &amp;

1 Selter PLLC2 Leon R. Turkevich

3 \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Advanced Micro Devices, Inc.

Sunnyvale, CA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☐ Issue Fee  
☐ Publication Fee (No small entity discount permitted)  
☐ Advance Order - # of Copies \_\_\_\_\_

4b. Payment of Fee(s):

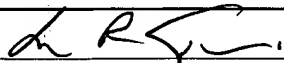
- ☐ A check in the amount of the fee(s) is enclosed.  
☐ Payment by credit card. Form PTO-2038 is attached.  
☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 01-0365 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Date December 7, 2005

Typed or printed name

Leon R. TurkevichRegistration No. 34,035

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



Docket No.: 95-307

PATENT

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Application of

KANURI *et al.*

Serial No.: 09/519,848

Filed: March 6, 2000

:  
:  
:  
:  
:  
:

Group Art Unit: 2663

Examiner: Ferris, Derrick W.

**Allowed: October 4, 2005**

**Confirmation No. 8165**

For: SELECTIVE ADDRESS TABLE AGING IN A NETWORK SWITCH BASED IN  
APPLICATION STATE DETERMINED FROM A RECEIVED DATA PACKET

**ISSUE FEE PAYMENT TRANSMITTAL**

Mail Stop Issue Fee  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

The undersigned hereby submits the following documents:

1. Issue Fee Transmittal Form (with authorization for charge Deposit Account 01-0365)
2. Fee Address Indication Form

09/519,848

**Allowed: October 4, 2005**

**Confirmation No. 8165**

The Commissioner is authorized to charge any shortage in fees due in connection with the filing of this paper, including Issue Fee Payment and Advance Order for Patent Copies, to Deposit Account 01-0365, Order No. E0905, and please credit any excess fees to such deposit account.

Respectfully submitted,

Manelli Denison & Selter, PLLC

A handwritten signature in black ink, appearing to read 'L R Turkevich', with a stylized flourish at the end.

Leon R. Turkevich  
Registration No. 34,035

Customer No. 20736  
2000 M Street, N.W., 7<sup>th</sup> Floor  
Washington, DC 20036-3307  
(202) 261-1000  
Facsimile (202) 887-0336  
**Date: December 7, 2005**